NATIONAL Assessment Centre Services (wef 1 Jan'05) MMA41812304

	Job description	Date & Time Completed	Done by
Date In: 20/09/2018 17:46	SAS e-filing		
Ref No: NBA/[illegible]C/1801/7/19/4	E-mail (within 8hrs, AIC 2hrs)		
Veh No: GBH 5416K	i-Motor Claim Form	MM1012333-001	20/09/2018 18:08
D.O.A 19/09/2018	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD / TP (circled) Reporting Only	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax:)

TP Particulars: Veh No: YP 7043A INC ( ) / Non-INC ( )

Owner / Driver: (Tel:)

Policy No: ( ) Period: ( ) Cover Type: ( )

Confirmed by : (*Date:* *Time:*)

Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: ($) Loading : $1,000 ( ) / $2,000 ( )

General Remarks:-

( ) **Walk-In Customer** : Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) **Total Loss Case** : **to e-mail Insurer URGENTLY.**

Drive-In ( ) / Towed-In ( ); Invoice: **YES** ( ) / **NO** ( ); Towing Co: ( )

Remarks:- (INC hotline: 6788 6616)	Date&Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > $3000] ( )		

Injury :

Date/Time	Actions

NA1806096

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) Add Bill
1) AR : Accident Reporting ($30);			
2) DA : Damage Assessment ($100); INC ($80)			
3) TF : Towing Fee	$40/$45		
4) FT : Follow-Through Survey	$120		
5) FT : Follow-Through Survey (Resurvey)	$30		
For claiming against INC Only (wef 10 Jan 2005)			
6) TR : Re-inspection	$75		
7) N1 : Idac DA + SMRT Survey	$160		
8) NTUC Additional Services:-			
OD*			
*N5: Courtesy Car / Tpt Allowance	$5		
*N6: Repair Co-ordination	$10		
*N7: Post Repair Inspection	$25		
*N8: DV / Collect Excess Coordination	$5		
TP (N11) : TP (Non INC) against INC	$20		
9) N12: Idac Mobile	30		
Invoice dated *Fee Charged*			[redacted]
Invoice dated *Fee Charged*		[redacted]	

MNA418122304 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 20/09/2018 17:46
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT	
Date Of Report	20/09/2018 17:46
Date Of Accident	19/09/2018 13:30
Exact Location Of Accident	ALONG CUSCADEN ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBH5416K
Insured/Policyholder	
Name Of Registered Owner	TOYO AIRCON (S) PTE LTD
Co Reg No	201812484G
Email Address	ACCOUNTS@TOYOAIRCON.SG
Mobile Phone No	(LOCAL) +65-93865161
Alternative Phone No	OFFICE-93865161
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101463035
Cover Note Number	
Driver	
Name of Driver	TOH LOO PHENG
NRIC No	S7002876Z
Date Of Birth	29/01/1970
Occupation	OUTDOOR
Date Of Driving Pass	06/11/1990
Driving Experience	27 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93865161
Fax Number	
Contact Number	OTHERS-93865161
EMail Address	ACCOUNTS@TOYOAIRCON.SG

Address	BLK 771 CHAO CHU KANG STREET 54 #02-53
Postcode	680771
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WONG WING LEONG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes,Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP7043A
Vehicle Make/Model/Colour	MITSUBISHI CANTER
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHIANG KIM FATT
NRIC/Passport Number	F7448459W
Contact Number	98111103
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

   I understand, acknowledge, agree and consent that:

   (a) My insurer, my workshop and the General Insurance Association of Singapore ("**GIA**") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

   (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

   (ii) investigating the accident and/or my claims;

   (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

   (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

   (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "**Purposes**")

   (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

   (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

   (e) the information so collected under (d) above may be shared / disclosed:

   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or

   (ii) for complying with requirements under any regulations, laws or court orders.

X

Policyholder's Signature
Date & Time:

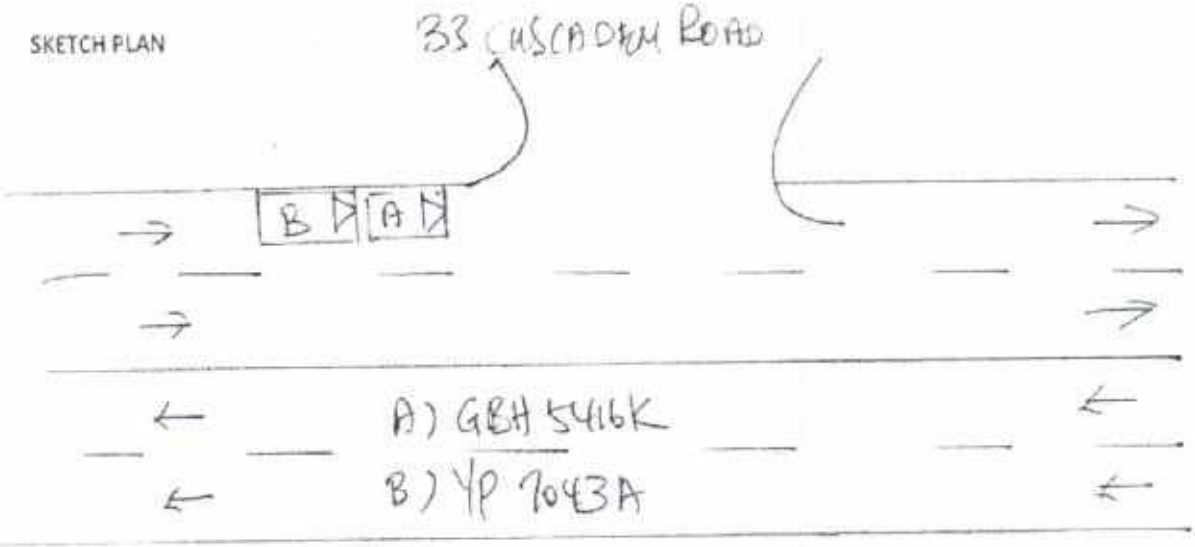
TOYO AIRCON (S) PTE LTD

Driver's Signature
(If driver is not the policyholder)
Date & Time:

20/09/2018

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I went down to change pass when our van stopped at road side. After that, I got on the van and sat down, ~~face~~ suddenly a vehicle (YP 7043 A) hit our van back. My driver (TOH LOO PHENG) dropped down and went to check van and then took some accident photoes. He asked the vehicle drive what happen. The vehicle driver said he forgot to pull the handbreak before he dropped off his vehicle.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

TOYO AIRCON (S) PTE LTD

Policyholder's Signature
Date & Time

Driver's Signature
(If driver is not the policyholder)
Date & Time

20/09/2018

Reporting Centre Personnel's Signature
Name
NRIC/FIN No

Claim Handling

Accident MT/1012333

Policy No.	5101463035	Vehicle No.	GBH5416K	GST Registration No.	
Certificate No.					
Policyholder Name	TOYO AIRCON (S) PTE LTD			Policyholder NRIC	201812484G
Product Code	COMMERCIAL VEHICLE INSURAI	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	93865161	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No / Yes	TCA	No / Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	20/09/2018 18:01	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	19/09/2018	Time of Accident hh:mm	13:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG CUSCADEN ROAD				

Excess

Own damage Excess	600.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No

Modification History

Policyholder Mailing Address

Address 1	BLK 2021 401-226	Address 2	BUKIT BATOK STREET 23	Address 3	BUKIT BATOK INDUSTRIAL
Address 4	SINGAPORE 659526	Address Type	Singapore address	Post Code	659526
Unit No.	01-226	Related Policy Number	5101463035		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TOH LOO PHENG	Driver NRIC	S7002876Z	Driver DOB	29/01/1970
Register Date of Driver License	06/11/1996	Driver Age	48	Driving Experience	27
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 771 #02-63	Address 2	CHOA CHU KANG STREET 54	Address 3	SINGAPORE 680771
Address 4		Address Type	Foreign address	Post Code	680771
Unit No.	02-63				
Does he own a Singapore Registered car?	Yes / No	Driver Vehicle No.	GBH5416K	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes / No

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	TOYO AIRCON (S) PTE LTD	Insured NRIC	20181
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	65074
Email Address		OI Vehicle Number	GBH5416K	TP Vehicle Number	YP704
Claim Description	GBH5416K / YP7043A ON 19 Sept 2018			Name of Preferred Workshop	
Preferred Workshop Request No. / Finalisation	Yes	Insured Liability	Not at Fault		
Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received		
Date Registered	20/09/2018 18:06	Claim Close Date		Date Received	20/09/
Report Taken By	ROSLI WAHAB				

✓ Print AK letter

Save Submit

Attachment

Accident No.	MT/1012333	Claim No.	001
Last Doc. Received	Yes / No	Upload Date	20/09/2018 18:08

Path *		Category *	Confidential	Urgency *	Desc
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description	M
	NAC_BUKIT_MERAH_800679(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos		Normal	Photos 2018-9-20	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:08	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	Photos	Normal	Photos 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	SAS	Normal	SAS 2018-9-20
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Sep 2018 18:07	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-9-20

Video List

Uploaded By/Date	Folder Date	File Name		Source

Display in New Window | Scan and uploading

Co's Stamp

ACCIDENT STATEMENT

ACCIDENT DATE: (19 / 09 / 2018) (DD/MM/YYYY), TIME: (13 : 30) (HH:MM)

LOCATION: Cuscaden RD

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: GBH 5416K
   b) INSURANCE COMPANY: Income
   c) POLICY NUMBER: 5101462037
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: Toyota Hiace
   f) TYPE: (SALOON / COUPE / MPV / (VAN) / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME:
   i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/(NO))
   IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

(cw/ Wong Wing Leong)

2. INSURED / POLICY HOLDER
   A) NAME: Toyo Aircon (S) Pte Ltd (MALE / FEMALE) CONTACT:
   b) NRIC/FIN/PASSPORT:
   c) ADDRESS:

   * CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passenger (including driver) (2)

3. DRIVER
   a) NAME: TOH LOO PHENG ((MALE) / FEMALE)
   b) NRIC/FIN/PASSPORT: S7002876Z CONTACT: 93865161
   c) ADDRESS:

   *d) DATE OF BIRTH: (29 / 01 / 1970) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS: 06 Nov 1990
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? ((YES) / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:
5. a) WEATHER CONDITION: ((CLEAR) / RAINING / OTHERS CLEAR
   b) ROAD SURFACE: ((DRY) / WET / OTHERS
6. WAS ANYBODY INJURED (YES / (NO))
7. a) REPORTED TO POLICE (YES / (NO))
   IF YES, PLEASE STATE WHICH POLICE STATION:
8. THIRD PARTY VEHICLE
   a) VEHICLE NUMBER: YP 7043 A MODEL: MITSUBISHI CANTER
   b) DRIVER'S NAME: CHONG KIM FOO
   c) NRIC/FIN/PASSPORT: F7464459W CONTACT: 98111103

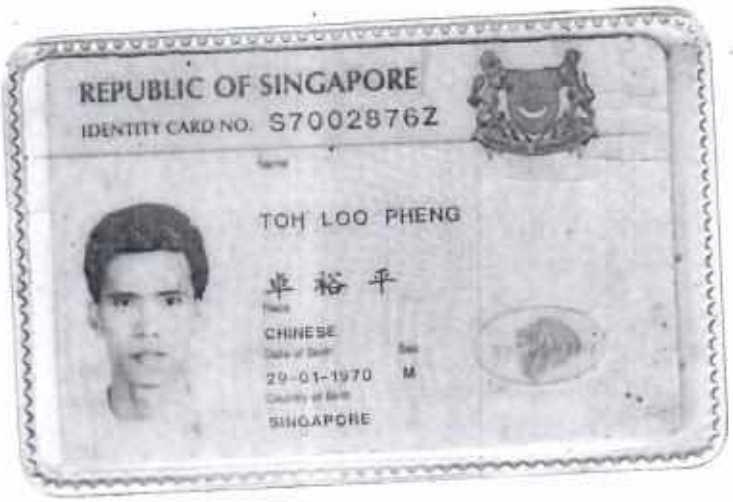
No. of passenger (including driver) ( )

9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

No. of passenger (including driver) ( )

EMAIL = wongwingleong1979@gmail.com.

VIDEO = accounts@toyoaircon.sg.


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7002876Z
TOH LOO PHENG
卓裕平
CHINESE
29-01-1970
M
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE
S7002876Z
TOH LOO PHENG
29 Jan 1970
01 Mar 2016


S7002876Z
O+
20-10-1984


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc 17 Mar 1988
Class 2A Motorcycles between 201 cc and 400 cc 05 Jul 1993
Class 3 Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg 06 Nov 1990
Licence No:S7002876Z
NP 428A

income
made different

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5101463035 Cover : Preferred Workshop Plan

1. Index mark and Registration Number of Vehicle : To Be Advised
   Chassis Number : JTFHT02P100243425
2. Name of Policyholder : TOYO AIRCON (S) PTE LTD
3. Effective Date of Insurance : 02 Jul 2018
4. Expiry Date of Insurance : 01 Jul 2019
5. Persons or Classes of Persons entitled to drive#
   (a) The Policyholder.
   (b) Any other person who is driving on the Policyholder's order or with his/her permission.
   Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.
   (b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	:	S$600
EXCESS (SECTION 2)	:	N/A
WINDSCREEN EXCESS	:	S$100
INSURE WITH COE	:	YES
HIRE PURCHASE COMPANY	:	UNITED OVERSEAS BANK LIMITED
SUM INSURED	:	MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : PRO-LINK INSURANCE AGENCY (00000571869)
Date of Issue : 29 Jun 2018 11:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive